

IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF PENNSYLVANIA

JASON MARCELLE	:	
	:	
Plaintiff,	:	
	:	
v.	:	
	:	
ALLENTOWN POLICE DEPARTMENT et al.	:	
	:	
Defendants.	:	
	:	CIVIL ACTION NO. 07-04376
AND	:	
	:	
CRYSTAL LEGRAND, individually and as	:	
Administratrix of the Estate of DAVIAY	:	
LEGRAND, and as parent and natural guardian	:	
of SHIANTI LEGRAND and NIJAIRE	:	
JONES, minors	:	
	:	
Plaintiff,	:	
	:	
v.	:	(Stengel, J.)
	:	
ALLENTOWN POLICE DEPARTMENT, et al.,	:	
	:	
Defendants.	:	

CERTIFICATE OF SERVICE

I, Robert G. Bauer, Esquire, of The Bauer Law Firm, P.C., do hereby certify that on June 6, 2011 I served upon the below named individual(s)/company(s) a true and correct copy of the Petition to Allocate Settlement Proceeds, Approve Settlement for the Estate of Daviay Legrand, and Approve Minors' Compromise, referencing the above captioned matter, addressed as follows, via Certified Return Receipt Requested (Return Receipts are attached):

Andre Watley
Inmate # JS9945
10745 Route 18
Albion, PA 16475

THE BAUER LAW FIRM, P.C.

Robert G. Bauer, Esquire
Robert G. Bauer, Esquire
200 Four Falls Corporate Center, Suite 312
West Conshohocken, PA 19428
(484) 222-2468

Date: June 16, 2011

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 		A. Signature X <i>S. Roberts</i> <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: <i>Andre Watley</i> <i>Inmate # JS9945</i> <i>10745 Rt. 18</i> <i>Albion, PA 16475</i>		B. Received by (Printed Name) <i>S. ROBERT</i> C. Date of Delivery <i>6/6/11</i>	
		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
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		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
2. Article Number (Transfer from service label)		7010 3090 0001 6364 1041	
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